

09/608039

APPLICATIONAL FEE SCHEDULE
Effective October 1, 1976

CLAIMS AS FILED - PART I

| | | |
|-------------------------------|----|---|
| 1. TOTAL CLAIMS | 20 | 3 |
| 2. TOTAL CHARGEABLE CLAIMS | 20 | 3 |
| 3. INDEPENDENT CLAIMS | 3 | 3 |
| 4. NUMBER OF DEPENDENT CLAIMS | 17 | 0 |

If the difference in column 1 is less than an amount entered in column 2?

| SMALL ENTITY TYPE | | OTHER THAN SMALL ENTITY | |
|-------------------|------|-------------------------|-------|
| RATE | FEES | RATE | FEES |
| BASIC FEE | 39= | \$12.96 | |
| X\$ 9= | | | |
| X44= | | OR | 788= |
| +150= | | OR | +300= |
| TOTAL | | OR | TOTAL |

CLAIMS AS AMENDED - PART II

| Column 1 | Column 2 | Column 3 |
|--|------------------------------------|---------------|
| CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | 17 | 20 |
| Independent | 3 | 3 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | |

| SMALL ENTITY TYPE | | OTHER THAN SMALL ENTITY | |
|-------------------|----------------|-------------------------|------------------|
| RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
| X\$ 9= | | OR | X\$18= |
| X44= | | OR | X88= |
| +150= | | OR | +300= |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE |

3/28/6

| (Column 1) | (Column 2) | (Column 3) |
|--|------------------------------------|---------------|
| CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | 15 | 20 |
| Independent | 3 | 3 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | |

| SMALL ENTITY TYPE | | OTHER THAN SMALL ENTITY | |
|-------------------|----------------|-------------------------|------------------|
| RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
| X\$ 9= | | OR | X\$18= |
| X44= | | OR | X88= |
| +150= | | OR | +300= |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE |

| (Column 1) | (Column 2) | (Column 3) |
|--|------------------------------------|---------------|
| CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
| Total | 15 | = |
| Independent | 3 | = |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | |

| SMALL ENTITY TYPE | | OTHER THAN SMALL ENTITY | |
|-------------------|----------------|-------------------------|------------------|
| RATE | ADDITIONAL FEE | RATE | ADDITIONAL FEE |
| X\$ 9= | | OR | X\$18= |
| X44= | | OR | X88= |
| +150= | | OR | +300= |
| TOTAL ADDIT. FEE | | OR | TOTAL ADDIT. FEE |

If the entry in column 1 is less than the entry in column 2, write '0' in column 3.

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter '20.'

If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter '0.'

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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